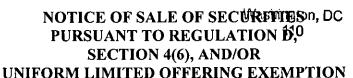
FORM D

UNITED STATES SEC Mail Processing SECURITIES AND EXCHANGE COMMISSION SECTION Washington, D.C. 20549

FORM D

AUG 15 2008



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F	Prefix Serial							
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		DATA REC	EIVED					
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Name of Offering (check if this is Convertible Promissory Notes and the	s an amendment and name has cha	•	change.)		
Filing Under (Check box(es) that apply)		□ Rule 506 □	Section 4(6)	ULOE	
Type of Filing: ☑ New Filing ☐	Amendment				
	A. BASIC ID	ENTIFICATION	DATA		
1. Enter the information requested abou	it the issuer				
Name of Issuer (check if this is	s an amendment and name has cha	nged, and indicate	change.)		
RCD Technology, Inc.					
Address of Executive Offices	(Number an	d Street, City, Stat	e, Zip Code)	Telephone N	umber (Including Area Code)
101 Mill Street, Suite P, Quakertown,	PA 18951			(215) 529-9440	
Address of Principal Business Operation (if different from Executive Offices)	ns (Number ar	nd Street, City, Sta	te, Zip Code)	Telephone N	lumber (Including Area Code)
Brief Description of Business Development, manufacture and mark	eting of radio frequency identifi	cation devices.			PROCESSED
Type of Business Organization			O ather (al		AUG 2 2 2008
Corporation	☐ limited partnership, alread	-	other (ple	ease specify:	**************************************
business trust	☐ limited partnership, to be t				THOMSON REUTERS
Actual or Estimated Date of Incorporati	· ——	Year O O 🖾 Ac			
Jurisdiction of Incorporation or Organiz	ation: (Enter two-letter U.S. Posta CN for Canada; FN for C			DE	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC	DENTIFICATION		
2. Enter the information re					
•		suer has been organized wit			
					of a class of equity securities of the issuer;
Each executive of	ficer and director of	of corporate issuers and of co	orporate general and man	aging partners o	f partnership issuers; and
Each general and	managing partner	of partnership issuers.			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, it Forgash, E. Michael, Jr.	f individual)				
Business or Residence Addre c/o Zon Capital Partners, 5					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, i Garby, Sandra	f individual)				
Business or Residence Addre c/o RCD Technology, Inc.,	,				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, i Todd Hewlin	f individual)			· · · · · · · · · · · · · · · · · · ·	
Business or Residence Addre c/o RCD Technology, Inc.,					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, i McKinney, Daniel	f individual)				
Business or Residence Addre c/o NextStage Capital L.P.,					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner			General and/or Managing Partner
Full Name (Last name first, i Oberle, Robert	f individual)				
Business or Residence Addre c/o RCD Technology, Inc.,					
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Walker, Christopher	f individual)				
Business or Residence Addre c/o RCD Technology, Inc.,					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, i Lazo, Phillip	f individual)				
Business or Residence Addre c/o RCD Technology, Inc.,					
	· -		2 of 10	••••	

Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Ben Franklin Technology P	,	astern Pennsylvania			
Business or Residence Addre 125 Goodman Drive, Bethle		reet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i NextStage Capital L.P.	f individual)				
Business or Residence Addre 2570 Boulevard of the Gene	,)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Zon Capital Partners L.P.	f individual)			. <u>.</u>	
Business or Residence Addre 5 Vaughn Drive, Suite 302,	•)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number and S	treet, City, State, Zip Code))		
	•			<u> </u>	

B. INFORMATION ABOUT OFFERING		
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Y e s □	No ⊠
Answer also in Appendix, Column 2, if filing under ULOE.	_	_
2. What is the minimum investment that will be accepted from any individual?	\$ <u>N/A</u>	
	Yes	No
3. Does the offering permit joint ownership of a single unit?	\boxtimes	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Not Applicable	j	
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)	☐ All	States
AL AK AZ AR CA CO CT DE DC FL GA	HI	[ID]
IL IN IA KS KY LA ME MD MA MI MN	MS	MO
MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI	OR WY	PA PR
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)	☐ All	States
AL AK AZ AR CA CO CT DE DC FL GA	HI	ID
IL IN IA KS KY LA ME MD MA MI MN	MS	МО
MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI	OR WY	PA
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)	☐ All	States
AL AK AZ AR CA CO CT DE DC FL GA	ΗΙ	ID
IL IN IA KS KY LA ME MD MA MI MN	MS	МО
MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI	OR WY	PA

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sqrt{\sqrt{\text{a}}} \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
		Aggregate	A	Amount Already
	Type of Security	Offering Price	•	Sold
	Debt		-	1,000,000
	Equity – Common Stock and Preferred Stock*		- *	<u>-</u>
	Convertible Securities (including warrants)	0	\$	0
	Partnership Interest			0
	Other (Specify)		- <u>-</u>	_
			- <u>-</u>	1,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.		- '-	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggrapata
		Number of Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	4	_ s	1,000,000
	Non-accredited Investors	0	\$	0
	Total (for filings under Rule 504 only)	N/A		N/A
3.	Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	Type of		Dollar Amount
	Type of Offering	Security		Sold
	Rule 505	N/A	_ \$	N/A
	Regulation A	N/A	_ s	N/A
	Rule 504	N/A	_ s	N/A
	Total	N/A	_ \$	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		s	
	Printing and Engraving Costs		\$	
	Legal Fees	\boxtimes	\$	5,000
	Accounting Fees		\$	
	Engineering Fees		s	
	Sales Commissions (specify finders' fees separately)		\$	
	Other Expenses (Identify)		\$	
	Total	Ø	S	5.000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PR	COCEEDS		<u>-</u>
b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		s _	995,000
Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.			
	Payments to Officers, Directors, & Affiliates		Payments to Others
Salaries and fees	\$		s
Purchase of real estate	\$		\$
Purchase, rental or leasing and installation of machinery and equipment	\$		\$
Construction or leasing of plant buildings and facilities	\$		\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	s		S
Repayment of indebtedness			<u> </u>
Working capital		_ ⊠	S 995,000
Other (specify):			

Total Payments Listed (column totals added)

□ \$_

⊠ \$ <u>995,000</u>

⊠ \$ 995,000

5.

Ð	FFD	IR I	M.S	IGN/	ATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)

RCD Technology, Inc.

Name of Signer (Print or Type)

Phillip Lazo

Signature
August 14, 2008

Title of Signer (Print or Type)

President

-ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE									
1.	ls any party described in 17 CFR 230.262 presently subject to any of the disqualification Yes No Provisions of such rule?									
	See Appendix, Column 5, for state response.									
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Fo. D (17 CFR 239.500) at such times as required by state law.									
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by th issuer to offerees.									
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.									
	uer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned thorized person.									
	(Print or Type) Technology, Inc. Signature August 14, 2008									
Name o	of Signer (Print or Type) Lazo Title of Signer (Print or Type) President									

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 3 4 1 Disqualification under State ULOE Type of security and aggregate (if yes, attach Intend to sell Type of investor and explanation of offering price to non-accredited waiver granted) offered in state amount purchased in State investors in State (Part C-Item 2) (Part E-Item 1) (Part C-Item 1) (Part B-Item 1) Number of Number of Non-Accredited Convertible Accredited No **Promissory Notes** Investors Investors Amount Yes State Yes No Amount ALΑK AZAR CA CO CT DE DC FL GA HI ID lL IN IΑ KS KYLA ME MDMA ΜI MN MS

				APPE	NDIX					
1	Intend to non-actinvestors (Part B-l	credited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Series A Preferred Stock	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО				-						
МТ										
NE		,					-			
NV										
NH	-									
NJ										
NM										
NY										
NC										
ND										
ОН										
ОК				-						
OR										
PA		Х	\$1,000,000	4	\$1,000,000	0	0		X	
RI SC									<u> </u>	
SD										
TN									<u></u>	
TX				-					ļ <u>.</u>	
UT										
VT										
VA								ļ		
WA									-	
wv							,	ļ		
WI								 		
WY							<u> </u>		<u> </u>	
PR								<u> </u>		